

C-A-M-P

Creative - Arts - Music & Performance



Find and Share Your Voice

Please attach a photo of camper here (or email as jpg)

C-A-M-P ENROLLMENT APPLICATION

CAMPER INFORMATION

Gender: M__ F__
 Camper First Name _____ Camper Last Name _____ Date of Birth (Month/Day/Year) _____

Age _____ Grade Completing _____ School _____ Contact Email _____

Any Nicknames? _____ Any other resident camps attended? _____ Which ones? _____

CAMPER'S HOME ADDRESS

Street _____ City _____ State _____ Country _____ Zip Code _____

Home Telephone _____ Home Fax _____ Camper Email _____ Referred to Camp by _____

SIBLING INFORMATION

1. First Name _____ Last Name _____ Birth date _____ Grade _____

2. First Name _____ Last Name _____ Birth date _____ Grade _____

3. First Name _____ Last Name _____ Birth date _____ Grade _____

PARENT INFORMATION

Sole Parent: Y__ N__

Married: Y__ N__

Child lives with: Mother__ Father__ Other__

Parent Name (last, first) _____ Occupation _____

Business address _____ Business Telephone _____

Parent Cell Phone _____ Parent Email _____

PAYMENTS

\$795 with applications, due by Feb 15 in order to reserve a spot. Balance of \$1000 by April 15. Make checks payable to "C-A-M-P", or if you prefer, charge deposit and all further payments to: Visa __ MasterCard__

Cardholder's Name _____
 Card # _____ Expiration Date _____

I expressly authorize charging the above noted credit card for all payments due C-A-M-P hereunder.

Parent Name (last, first)

Occupation

Business address

Business Telephone

Parent Cell Phone

Parent Email

Parent SIGNATURE

Parent SIGNATURE

Signature

Date

PLEASE RETURN COMPLETED APPLICATIONS & CONTRACTS TO:

C-A-M-P
P.O. Box #484
Tesuque, NM 87574

Signature of both parents is required for admission
